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15750 U.S. PTO

for
PTO DEPOSIT ACCOUNT CHARGE
ACCOUNT 704-1700

Express Mail Number: EV 402336808 US

Date Deposited: 01/16/2004

DUNLAP CODDING & ROGERS, PC

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. PTO
10/759864

01162004

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. 3244.002	
	First Inventor Mark Hansen	
	Title CHAIR ASSEMBLY	
	Express Mail Label No. EV 402336808 US	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<p style="text-align: center;">APPLICATION ELEMENTS</p> <p>See MPEP chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 25] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description -Redline Specification ____ pgs - Claim(s) -Clean Specification ____ pgs - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]</p> <p>5. Oath or Declaration [Total Pages 2]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)</p> <p>b. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>ADDRESS TO: Mail Stop Patent Appl., Comm. for Patents PO Box 1450 Alexandria, VA 22313-1450</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p style="text-align: center;">ACCOMPANYING APPLICATION PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p>
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18. This application is:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____ / _____

Prior application information: Examiner _____ Group Art Unit: _____

☐ As a CON, DIV, or CIP, this application contains one or more changes to (1) the specification; (2) drawings; or (3) claims in the above-identified prior application. A red-line version of the application showing these changes will be made available to the examiner upon request.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 30589 (Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

Name Dunlap, Coddling & Rogers, P.C.					
Address P. O. Box 16370					
City	Oklahoma City	State	OK	Zip Code	73113
Country	USA	Telephone	(405) 607-8600	Fax	(405) 607-8688

Name (Print/Type)	Glen M. Burdick	Registration No. (Attorney/Agent)	24,230
Signature	<i>Glen M. Burdick</i>		Date 1-16-04

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Approved for use through 07/31/2006. OMB 0631-0032
DUNLAP, CODDING & ROGERS, P.C. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 385

Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Mark Hansen
Examiner Name	Not Yet Assigned
Art Unit	
Attorney Docket No.	3244.002

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 04-1700
Deposit Account Name: Dunlap, Coddling & Rogers, P.C. Customer No. 30589

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	385
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$) 385

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: 12 - 20 or more = ☐ X ☐ = \$0
Independent Claims: 2 - 3 = ☐ X ☐ = \$0
Multiple Dependent: ☐ = \$0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 420	2252 210			Extension for reply within second month	
1253 950	2253 475			Extension for reply within third month	
1254 1,480	2254 740			Extension for reply within fourth month	
1255 2,010	2255 1,005			Extension for reply within fifth month	
1401 330	2401 165			Notice of Appeal	
1402 330	2402 165			Filing a brief in support of an appeal	
1403 290	2403 145			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,330	2453 665			Petition to revive - unintentional	
1501 1,330	2501 665			Utility issue fee (or reissue)	
1502 480	2502 240			Design issue fee	
1503 640	2503 320			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180			Submission of Information Disclosure Stmt	
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	
1809 770	2809 385			Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385			For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0

SUBMITTED BY

Name (Print/Type)	Glen M. Burdick	Registration No. (Attorney/Agent)	24,230	Telephone	(405) 607-8600
Signature	<i>Glen M. Burdick</i>	Date	01/16/2004		

Mail Stop Patent Application
Commissioner for Patents
PO Box 1450, Alexandria, VA 22313-1450